

**PAST PERFORMANCE QUESTIONNAIRE COVER SHEET  
FOR SOLICITATION NUMBER N00174-03-Q-0112**

Name of offeror questionnaire is being completed for:

---

---

---

Name of company completing questionnaire:

---

Name of the person and title completing questionnaire:

---

---

Length of time your firm has been involved with the offeror:

---

Type of work performed by referenced offer:

---

---

**SUBMIT PAST PERFORMANCE QUESTIONNAIRE TO:**

NAVSEA INDIAN HEAD, SURFACE  
WARFARE CENTER DIVISION  
101 Strauss Avenue, Bldg 1558  
Indian Head MD 20640-5035  
Karen A. Tindley, Contract Specialist,  
Code 1142J  
BY: July 2, 2003

**ATTACHMENT 2**

**SOURCE SELECTION INFORMATION SEE FAR 3.104**

**PAST PERFORMANCE QUESTIONNAIRE INTERVIEW SHEET  
SOLICITATION NUMBER: N00174-03-Q-0112**

**RATING SCALE**

Please use the following ratings to answer the questions. If you are unable to rate an item because it was not a requirement, never an issue, or you have no knowledge of the item in question then you should mark "N/A".

**EVALUATION CRITERIA**

- |                      |   |
|----------------------|---|
| <b>Exceptional -</b> | The offerors performance was consistently superior.<br>The contractual performance was accomplished with<br>Few minor problems for which corrective action taken<br>By the contractor were highly effective.  |
| <b>Average -</b>     | The offerors performance was good, better than average,<br>Etc., and that they would willingly do business with the<br>Offeror again. The contractual performance was<br>Accomplished with some minor problems for which<br>Corrective actions taken by the contractor were effective.                            |
| <b>Neutral -</b>     | No record exists.   |
| <b>Poor -</b>        | The offerors performance was entirely unsatisfactory<br>And that they would not do business with the offeror<br>again under any circumstances. The contractual<br>performance of the element being assessed contains<br>problems for which the contractor corrective actions<br>appear to be or were ineffective. |

ATTACHMENT 2

SOURCE SELECTION INFORMATION SEE FAR 3.104

**CUSTOMER SATISFACTION**

1. The referenced contractor was responsive to the Customers needs. E G N P N/A
2. The contractors personnel were qualified To meet the requirements. E G N P N/A
3. The contractors ability to accurately estimate Costs. E G N P N/A

**TIMELINESS**

4. The contractors ability to ensure, to the extent of Its responsibility, that all tasks were completed within The requested time frame. E G N P N/A

**RELIABILITY**

5. The contractor had a clear understanding of the work Detailed in the SOW. E G N P N/A
6. The contractors ability to complete tasks correctly the first time. E G N P N/A
7. The contractors ability to resolve problems. E G N P N/A

**PRODUCT QUALITY**

8. The contractors quality and reliability of services delivered. E G N P N/A
9. Quality, reliability, and maintainability of hardware delivered. E G N P N/A

ATTACHMENT 2

SOURCE SELECTION INFORMATION SEE FAR 3.104

**PLEASE PROVIDE SUBJECTIVE REPONSES FOR THE FOLLOWING:**

10. Would you recommend this contractor for similar government contracts? Please explain:

11. Have you experienced special or unique problems with the referenced contractor that we should be aware of in making our decision?

12. In summary, which of the following would you choose to describe the quality of the referenced contractors service:

Significantly better than acceptable

Slightly better than acceptable

Acceptable

Slightly less than acceptable

Entirely unacceptable

13. In summary, which of the following would you choose to describe reference contractors willingness to cooperate to resolve performance disagreements:

Highly cooperative

Cooperative

Somewhat uncooperative

Highly uncooperative

Thank you for taking the time to complete the above information.

Interviewers Name: \_\_\_\_\_, Date \_\_\_\_\_.

ATTACHMENT 2

SOURCE SELECTION INFORMATION SEE FAR 3.104

**PAST PERFORMANCE MATRIX**

<b>References</b>	<b>\$ Value of Contract</b>	<b>Work Description</b>	<b>Contract Completed on Time YES / NO</b>	<b>Contract Completed at Proposed Cost YES / NO (if no % of overrun)</b>	<b>Provide Explanation for NO answers</b>

REFERENCES COLUMN SHOULD INCLUDE GOVERNMENT ACTIVITY/ COMPANY NAME, ADDRESS, POC AND TELEPHONE NUMBER.

ATTACHMENT 1

SOURCE SELECTION INFORMATION SEE FAR 3.104